# Asthma Acute Exacerbation Episode Executive Summary

#### **Episode Design**

- Trigger: asthma acute exacerbation treatment
- Quarterback type: facility (asthma acute exacerbation treatment site)
- **Care included:** all asthma-related care, including drug therapy and home health visits

#### **Sources of Value**

- Reduce avoidable ED visits (value captured by medical home)
- Reduce avoidable inpatient admissions
- Treat with appropriate medication
- Encourage appropriate length of stay
- Prescribe appropriate follow-up care & increase compliance (e.g., medications, education, counseling)
- Reduce avoidable re-encounters / complications

## **Episode Duration**

Pre-Trigger

Trigger

Post-Trigger

No pre-trigger window

Duration of the episodetriggering visit or stay

30 days beginning the day
after the triggering window

### **Quality Metrics**

#### **Tied to Gain-Sharing**

- Follow-up care within the post-trigger window (higher rate is better)
- Appropriate medications within the trigger and post-trigger (higher rate is better)

#### **Informational Only**

- Repeat acute exacerbation within the post-trigger window
- Inpatient setting of acute exacerbation
- · Smoking cessation counseling
- Patient education on exacerbations
- Chest x-ray utilization

## **Making Fair Comparisons**

#### **Exclusions**

- Business exclusions: inconsistent enrollment, third-party liability, dual eligibility, FQHC/RHC, no PAP ID, incomplete episodes, overlapping episodes
- Clinical exclusions: different care pathway (e.g., chronic airway obstruction, cystic fibrosis, HIV, hemophilia and other clotting disorders, intubation, malignant cancer, multiple sclerosis, pulmonary hypertension, sickle cell disease, supplemental oxygen, tracheostomy, active cancer management, DCS custody)
- Patient exclusions: age (less than 2 or greater than 64 years old), death, left against medical advice
- High-cost outlier: episodes with risk-adjusted spend greater than three standard deviations above the average risk-adjusted episode spend for valid episodes are excluded.

**Risk adjustment** is used to ensure appropriate comparisons between patients.

**To learn more about the episode's design**, please reference the Detailed Business Requirements (DBR) and Configuration File on our website at <a href="https://www.tn.gov/tenncare/health-care-innovation/episodes-of-care/searchable-episodes-table.html">https://www.tn.gov/tenncare/health-care-innovation/episodes-of-care/searchable-episodes-table.html</a>.

